

Brigham City Recreation
TRAVELING PONY LEAGUE
(7th, 8th & 9th Grade)

Participant's Name: _____
Address (include city, zip): _____
Home Phone: _____ Cell Phone: _____ Age: _____ Grade: _____
Email address: _____

Fees: *****Make Checks Payable to BCC*****

\$55 Pony League Registration

\$60 after April 30th

\$15 Bee's jersey (if needed)

Shirt size (circle) s m l xl (adult sizes)

Liability Release/Waiver

I authorize my child to participate in Pony League Baseball. I understand Pony League Baseball contains certain dangers and *inherent risks*, particularly if my child fails to follow written warnings or verbal instructions or engages in activities beyond his or her abilities. I will specifically look for and instruct my children on these dangers and warning signs. Knowing these risks, I believe that the benefits of my child's participation in Pony League Baseball outweigh any risk associated with this activity. Individually, and on behalf of my child, I agree to release Brigham City Corporation and its agents and employees from all claims arising from known, reasonable and/or inherent risks associated with my child's participation. I further understand that it is my responsibility to keep my child from participating in any activity beyond his or her abilities.

I further consent to allow my child's picture or likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the Recreation Department in any manner incidental to his/her participation in the activity herein, without compensation to me.

DATE: _____

Signature Parent or Guardian

I would be interested in:

Coaching

Assistant Coaching

Officiating

Scorekeeping

Name: _____

Phone: _____

REFUNDS: \$5.00 HANDLING FEE IF REQUEST FOR REFUND IS MADE BEFORE THE PROGRAM BEGINS
75% REFUND IF REQUEST FOR REFUND IS MADE AFTER 1ST WEEK OF PROGRAM
50% REFUND IF REQUEST FOR REFUND IS MADE AFTER 2ND WEEK OF PROGRAM
0% REFUND IF REQUEST FOR REFUND IS MADE AFTER 3RD WEEK OF PROGRAM